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CONFIRMATION NO. 3871

<b>SERIAL NUMBER</b> 10/735,910	<b>FILING OR 371(c) DATE</b> 12/16/2003 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1614	<b>ATTORNEY DOCKET NO.</b> 2240-199065
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**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a CON of 10/270,313 10/15/2002 PAT 6,777,444 which is a CON of 09/851,425  
 05/09/2001 PAT 6,608,108  
 which is a CIP of 09/690,063 10/16/2000 PAT 6,417,234  
 which is a CIP of 09/418,594 10/15/1999 PAT 6,214,874 ✓ *Wong*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
 NONE. ✓ *Wong*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED** \*\* SMALL ENTITY \*\*  
 \*\* 03/23/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Examiner's Signature <i>Wong</i> Initials <i>Wong</i>	<b>STATE OR COUNTRY</b> MD	<b>SHEETS DRAWING</b> 24	<b>TOTAL CLAIMS</b> 23	<b>INDEPENDENT CLAIMS</b> 4
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**ADDRESS**  
26694

**TITLE**  
Method for treatment of tumors using nordihydroguaiaretic acid derivatives

<b>FILING FEE RECEIVED</b> 455	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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